STATE OF SOUTH CAROLINA)	BEFORE THE PUBLIC SERVICE COMMISSION OF SOUTH CAROLINA
(Caption of Case)	j j	PUBLIC SERVICE COMMISSION
Example: Application for a Class C Charter Certificate from)	OF SOUTH CAROLINA
John Doe dba Doe's Limo)	
Application for Class C Charter Certificarte from	m)	TRANSPORTATION COVER SHEET DOCKET NUMBER: 2020 - 47 - 7
Benjamin Mack dba Buggage LLC)	DOCKET TO THE TENT OF THE TENT
)	NUMBER: 2020 - 47 - 7
)	Ü
)	If this is your first time filing an application with the PSC, you will not the have a Docket Number. The Commission will assign one to you. If you
)	have filed with the Commission before, a Docket Number was assigned \overline{G} and should be entered above.
(Please type or print) Submitted by:		9/2 571 0909
Submitted by:		Telephone:
Address: 167 Coming St, Charleston SC 29401		Fax:
		<u> </u>
		had Obassas and
NOTE: The cover sheet and information contained herein neit	her renlaces	nor supplements the filing and service of pleadings or other papers
		ommission of South Carolina for the purpose of docketing and must
NATURE OF A	CTION	(Check all that apply)
Application - Class A/A Restricted		Request for Name Change on Certificate
Application - Class C Taxi		Request to Amend Scope of Authority
Application - Class C Charter		Request to Amend Scope of Authority Request to Amend Tariff (rate increase, etc.)
Application - Class C Charter Bus		Request to Amend Passenger Limit
Application - Class C Non-Emergency	72	Request
Application - Class C Stretcher Van Application - Class E Household Goods		Exhibit RECEIVED
Application - Class E Household Goods	EIVE]	Late-Filed Exhibit FEB 0 5 2020
Application - Class E Hazardous Waste Application		Letter PSC SC
Application		Proposed Order MAIL / DMS
Request for Extension to Comply with Order		Publisher's Affidavit
Request for Order Granting Authority to Obtain a Ce		Reservation Letter
of Public Convenience and Necessity to be Rescinde	a	Response
Request for Cancellation of Certificate		Return to Petition
Request for Suspension		Other:
Request for Reinstatement		

If you have any questions about this form, please contact the PUBLIC SERVICE COMMISSION at 803-896-5100.

PUBLIC SERVICE COMMISSION OF SOUTH CAROLINA 101 Executive Center Drive, Suite 100

101 Executive Center Drive, Suite 10 Columbia, South Carolina 29210

Phone: (803) 896-5100

Fax: (803) 896-5199

2020-47-7 290196

APPLICATION FOR CERTIFICATE OF PUBLIC CONVENIENCE AND NECESSITY FOR OPERATION OF MOTOR VEHICLE CARRIER

	Date:	January 23, 2020	2520041 \$
CI	LASS C - CHARTER		- 2020
-	plication is hereby made for a Certificate of Public Convenience and Nec	essity, in accordance	with the provision swith the provision
10	S.C. Code Ann., § 58-23-10, et seq. (1976), and amendments thereto.		5 2:22 PM
1.	Buggage LLC		Š
-	Name under which business is to be conducted (corporation, partnership, or sole	proprietorship, with o	r without trade name.)
	Name under which business is to be conducted (corporation, partnership, or sole 92 N Market St., Charleston, SC 29	401	CPSC
-	Street Address of Applicant	1	
	29 1/2 Gadsden St. Charleston, SC 2	9401	2020-47-T
-	Mailing Address of Applicant (if different from s	street address)	0-4
	843-571-9808		7-T
•	Phone	Fax	
	book@buggage.com		Page
•	Email Address		N
2.	If the Applicant is an LLC or a corporation, a copy of the Certificate of I Secretary of State and the Articles of Incorporation must be attached. (If i Carolina Secretary of State "Foreign Corporation" Certificate.)		
3.	Select Entity Type: (Check one)		
	☐ Individual Owner/Sole Proprietorship		RECEIVET
	□ Partnership - List names and addresses of all person having an interpretation.	rest in the business.	EED 0 2 2020
	Corporation - List names and addresses of two principal officers.		FEB 05 2020
	Benjamin M Mack 167 Coming St. Charleston, SC 29401		PSC SC MAIL / DMS
	Lydia Mack 167 Coming St. Charleston, SC 29401		
			10

ACCEPTED FOR PROCESSING - 2020 February 5 2:22 PM - SCPSC - 2020-47-T - Page 3 of

Applicant is financially able to furnish the services as specified in this application and submits the following statement of assets and liabilities.

Financial Statement

Applicant's assets and liabilities are as follows:

Assets:		<u>Liabilities:</u>	
Value of Real Estate	5200000	Mortgage/Loan on Real Estate	3300000
Value of Motor Vehicles	85000	Loans Owed on Motor Vehicles	32000
Cash on Hand	10000	Business/Other Loans Owed	250000
Cash in Bank	85000	Other Liabilities or Debts	7500
Value of Other Assets and Equipment	100000	Total Liabilities	3,589,500

5,480,000

INSTRUCTIONS:

Total Assets

- 1. "Value of Real Estate" means the actual or estimated market value of any real property/buildings owned by the Company/Business Applying for a Certificate.
- 2. "Mortgage/Loan on Real Estate" means the outstanding balance on any Mortgage, Equity Line or other Loan secured by the Real Estate listed in Item 1.
- 3. "Value of Motor Vehicles" means the actual or fair estimated value of any moving vans, trucks or other vehicles owned by the Company/Business Applying for a Certificate.
- 4. "Loans Owed on Motor Vehicles" means the outstanding balance on any loans or liens on the vehicles listed in Item 3.
- 5. "Cash on Hand" is the total of actual cash held by the Company/Business applying for a Certificate on the day this form is filled out.
- 6. "Business/Other Loans Owed" means the outstanding balance on any small business loan or other unsecured loan made by a person, bank or business to the Business/Company applying for a Certificate.
- 7. "Cash in Bank" means the current balance in checking accounts, savings accounts or the like in the name of the Company/Business applying for a Certificate. Do not include retirement accounts or personal bank account balances.
- 8. "Value of Other Assets and Equipment" should include the actual or estimated value of items such as office equipment (computers/furnishings), moving equipment (hand trucks/blankets/strapping), and trailers.
- 9. "Other Liabilities or Debts" means specific amounts/balances which the Company/Business applying for a Certificate knows that it owes to other persons or companies; for example Franchise Fees. This does NOT include regular bills such as electricity bills, security system costs, insurance, salaries, etc.

PROPOSED RATES AND CHARGES FOR SERVICE

Proposed Rates and Charges:

We propose the highest charge will be for \$450/hr with full service. Our prices are significantly less everyday on our website. This would be for the instance of a large group that keeps several vehicles waiting and then travels during peak times to the airport. Normal rates will average around \$200/hr when vehicles are at full capacity.

You will only be allowed to operate in those counties checked below. You may request "Statewide" authority if you intend to operate in all counties in South Carolina.				
Abbeville	Cherokee	Florence	Lee	Saluda
Aiken	Chester	Georgetown	Lexington	
Allendale	Chesterfield	⊠ Greenville	Marion	Sumter
Anderson	Clarendon	Greenwood	Marlboro	Union
Bamberg	Colleton	Hampton	McCormick	Williamsburg
Barnwell	Darlington	Horry	Newberry	York
Beaufort	Dillon	Jasper	Oconee	
⊠ Berkeley	□ Dorchester	Kershaw	Orangeburg	X Statewide
Calhoun	Edgefield	Lancaster	Pickens	
Charleston	Fairfield	Laurens	Richland	

Requested Scope of Authority: Check all counties in which you are requesting permission to operate.

DESCRIPTION OF EQUIPMENT

You are **not** required to own a vehicle to file an application. However, prior to being issued a certificate by ORS, you will be required to have obtained a vehicle.

Maximum Nur	nber of Passengers Vehicle is Equ	ipped to Carry: (The number of passen	rers a vehicle is equipped
to carry is base	ed on the number of seatbelts in the	ne vehicle, including the driver's seatbel	t.)
			,
1-7 Pa	ssengers, including driver		
∇ 0 15 D			
Ø-15 P	assengers, including driver		
MAKE	YEAR & MODEL	VIN#	EMPTY WEIGHT
FORD	2019 TRANSIT 350 XLT	1FBAX2CM9KKA06076	6023

	INSURANCE QUOTE
his form MUST BE COMPLETE he insurance quote must be comple surance policies may be required. I urchase insurance until your applica	INSURANCE QUOTE D. te, listing current insurance premiums. At the discretion of the Commission, a copy of curre to not provide a copy of insurance policies unless requested. You will not be required to ation has been approved and an order has been issued by the PSC. THIS IS ONLY A QUOT
The following insurance quote i	s for:
	Benjamin Mack
	Name of Applicant
	92 N MARKET ST, CHARLESTON SC 29403
	Address of Applicant
Amount of Premium:	Limits Quoted: (See Below)
Liability Insurance \$ \$900	Limits \$300,000
The above quoted premium is f	for a term of 12 months.
Minimum Limits - Intrastate	•
1-7 Passengers* 8-15 Passengers*	\$ 25,000/50,000/25,000 * Passengers = Number of seatbelts in the vehicle, including the driver's seatbelt
	COLUMBIA INSURANCE COMPANY
152	Name of Insurance Company
	4016 FARNAM ST, OMAHA, NE 68131
i i i i i i i i i i i i i i i i i i i	Home Office Address of Company
the above quote meets the minir	th the Commission's Rules and Regulations relating to insurance requirements and num insurance limits prescribed. The insurance company making this quote is a Department of Insurance to do business in South Carolina.

NOTICE:

If you wish to self-insure your motor vehicles for liability and property damage, you must comply with S.C. Code Ann. Sections 56-9-60 and 58-23-910. For more information, contact the Department of Motor Vehicles at (803) 896-8457 or (803) 896-9903.

If you wish to apply as a self-insured for worker's compensation coverage in South Carolina you may do so with the South Carolina Worker's Compensation Commission (WCC) provided that you will be able to: 1) post a surety bond or letter-of-credit with the WCC for a minimum of \$500,000, 2) agree to pay a yearly self-insurance tax, and 3) agree to pay an annual assessment to the South Carolina Second Injury Fund. For more information, contact the WCC Self-Insurance Division at (803) 737-5712 or on the web at www.wcc.state.sc.us/self-insurance.

Easterling, Deborah

From:

benjamin Mack

bmack861@gmail.com>

Sent:

Sunday, February 2, 2020 1:20 PM

To:

PSC_Contact

Subject:

[External] Fwd: Buggage update

Attachments:

PAGE 5 C CLASS CHARTER.pdf

Hi Jan, thanks for helping with the application. Sorry I was out of commission since we spoke, caught the cold bug.

Here is the redo portion of the application and the insurance info below.

Anything else needed please let me know happy to help.

Best Regards,

Ben Mack

----- Forwarded message -----

From: Paula Stubblefield pstubblefield@ctlowndes.com>

Date: Fri, Jan 24, 2020 at 7:28 AM

Subject: Buggage update

To: benjamin Mack < bmack861@gmail.com >

Ben, The quote is updated to \$300,000 liability and \$1,000 deductibles. The payment plans are:

Due Date	Percent	Amount	Installment Fee	
1	At binding	20%	\$2253.00	\$0
2	2/23/2020	8%	\$900.36	\$8
3	3/23/2020	8%	\$900.96	\$8
4	4/23/2020	8%	\$900.96	\$8
5	5/23/2020	8%	\$900.96	\$8
6	6/23/2020	8%	\$900.96	\$8
7	7/23/2020	8%	\$900.96	\$8
8	8/23/2020	8%	\$900.96	\$8
9	9/23/2020	8%	\$900.96	\$8
10	10/23/2020	8%	\$900.96	\$8
11	11/23/2020	8%	\$900.96	\$8

You can pay by credit card or ACH to initiate the policy.

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Paula Stubblefield, CIC, CPIW, CISR, AIAM, DAE, CLP

C.T. Lowndes & Company

966 McCants Dr. Mt. Pleasant, SC 29464

Direct 843-737-8303

Office 843-884-3159 fax 843-881-8891

www.ctlowndes.com



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OUR VISION: The insurance agency of choice that builds customer relationships through honesty, integrity, and outstanding service.

DISCLAIMER: Insurance policies/coverage cannot be bound or changed by email. Written or verbal confirmation by a licensed agent is required.

<u>Confidentiality Note:</u> The information contained in the electronic mail is privileged and confidential and is intended for the use of the individual or entity named above. If the reader of the message is not the intended recipient, you are hereby notified that any dissemination, distribution or copy of this electronic mail is strictly prohibited. If you have received this electronic mail in error, please immediately notify the sender and delete copies.

Exhibit Fit, Willing, and Able (FWA)

	Benjamin Mack
	Name of Applicant
l.	Are there currently any outstanding judgments against the Applicant? O Yes No
	If Yes, list judgements here:
2.	Is Applicant familiar with all statutes and regulations, including safety regulations and governing for-hire motor carrier operations in South South Carolina, and does Applicant agree to operate in compliance with these statutes and regulations?
	YesNo
3.	Is Applicant aware of the Commission's insurance requirements and the insurance premium costs associated therewith?
	• Yes O No

Exhibit on Driver Qualifications

1.	Applicant understands t	hat all drivers must be a m	inimum of 18 years of age.
	Yes	O No	
2.	and such record from th		driver's three (3) year driving record issued by the SC DMV ch the driver is or has been domiciled for such period must
	Yes	O No	
3.		that a criminal history back he Applicant's business off	ground check from the state where the driver currently lives fice.
	• Yes	O No	
4.		perating a charter vehicle,	vehicle under a Class C Certificate must have in a valid driver's license issued by the SC DMV or the current
	Yes	O No	
5.	vehicles to drivers who		holders are prohibited from employing or leasing to be registered, as sex offenders with the South Carolina egistry of sex offenders.
	Yes	O No	

PUBLIC SERVICE COMMISSION OF SOUTH CAROLINA 101 EXECUTIVE CENTER DRIVE, SUITE 100 COLUMBIA, SOUTH CAROLINA 29210

Applicant is familiar with the provision of S.C. Code Ann. §58-23-10, et seq.(1976), and amendments thereto, and R.103-100 through R.103-241 of the Commission's Rules and Regulations for Motor Carriers (S.C. Code Ann. Regs., 1976), and R.38-400 through R.38-503 of the Department of Public Safety's Rules and Regulations for Motor Carriers (Volume 2, S.C. Code Ann., 1976) and amendments thereto, and hereby promises compliance therewith.

S.C. Code Ann. Section 58-3-250 states, in part, that every final order of the Commission must be served by electronic service, registered or certified mail, upon the parties to the proceeding or their attorneys.

Pl	ease	check	the	app!	lical	ole	box:
----	------	-------	-----	------	-------	-----	------

- The Applicant AGREES to receive future Commission orders related to the Applicant's authority in South Carolina through the Commission's eService System. The Applicant authorizes the Commission to serve its orders by using the email address as it appears on page one of this Application. To sign up for eService notifications, please visit www.psc.sc. gov to create a My DMS account.
- The Applicant DOES NOT AGREE to receive future Commission orders related to the Applicant's authority in South Carolina through the Commission's eService System.

The Applicant for the Certificate of Public Convenience and Necessity as set forth in the foregoing, swear or affirm that all statements contained in the above application are true and correct.

Bengain M. Mark
Applicant's Signature
Owner
Title of Applicant (e.g. President, Owner, etc.)

STATE OF SOUTH CAROLINA)
Charleston)
COUNTY OF)
SWORN TO BEFORE ME	
This 23 day of January,	20 20
Notaty Public Commission Expires 07 11 2024	My Comm. Exp. 07-11-2026 OC. UBLIC OF CAROLINAMINAMINAMINAMINAMINAMINAMINAMINAMINAM

Print Application

The State of South Carolina



Office of Secretary of State Mark Hammond

Certificate of Existence

I, Mark Hammond, Secretary of State of South Carolina Hereby Certify that:

Buggage Ilc, a limited liability company duly organized under the laws of the State of South Carolina on July 22nd, 2019, with a duration that is at will, has as of this date filed all reports due this office, paid all fees, taxes and penalties owed to the State, that the Secretary of State has not mailed notice to the company that it is subject to being dissolved by administrative action pursuant to S.C. Code Ann. §33-44-809, and that the company has not filed articles of termination as of the date hereof.

Given under my Hand and the Great Seal of the State of South Carolina this 23rd day of January, 2020.

Mark Hammond, Secretary of State

South Carolina Secretary of State

Business Entities Online

File, Search, and Retrieve Documents Electronically

Buggage llc

Corporate Information

Entity Type: Limited Liability Company

Status: Good Standing

Domestic/Foreign: Domestic

Incorporated State: South Carolina

Important Dates

Effective Date: 07/22/2019

Expiration Date N/A

Term End Date: N/A

Dissolved Date: N/A

Registered Agent

Agent: Ben Mack

Address: 29 Gadsden st

Charleston, South Carolina 29401

Official Documents On File

Filing Type	Filing Date	_
Articles of Organization	07/22/2019	

For filing questions please contact us at 803-734-2158